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FAX COVER LETTER

DATE: December 6, 2005

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Transmittal Form
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Change of Correspondence Address (Patent)
"Fee Address" Indication Form

Attorney Docket No.: 13DV-13906 (07783-0081)
Application No.: 10/029,365
Filed: December 20, 2001

US Patent No.: 6,755,924
Issued: June 29, 2004

FAX NUMBER: (717) 237-5300

PARALEGAL RESPONSIBLE: Theodore R. West **TELEPHONE:** (717) 237-5349

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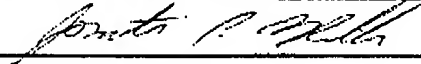
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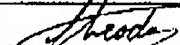
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/029,365; Patent No. 6,755,924
		Filing Date	20-Dec-2001; Issued: 29-June-2004
		First Named Inventor	HARRISON et al.
		Art Unit	1742
		Examiner Name	SHEEHAN, John P.
Total Number of Pages in This Submission	5	Attorney Docket Number	13DV-13906 (07783-0081)

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<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Fax Transmittal Fee Address Indication Form
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	McNees Wallace & Nurick LLC Jonathan P. Miller, Attorney Reg. No. 48,483
Signature	
Date	December 6, 2005

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003/005

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	Issue Date	June 29, 2004
	Application Number	10/029,365
	Filing Date	December 20, 2001
	First Named Inventor	HARRISON et al.
	Attorney Docket Number	13DV-13906 (07783-0081)

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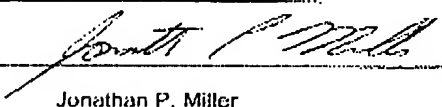
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☒ Attorney or agent of record. Registration Number 48,483.

Signature 

Typed or Printed Name Jonathan P. Miller

Date December 6, 2005	Telephone (717) 237-5358
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PTO/SB/97 (08-03)
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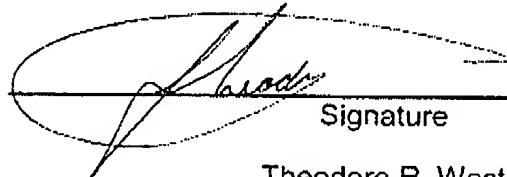
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Transmittal Form

Change of Correspondence Address - Patent

"Fee Address" Indication Form

Certificate of Fax Transmittal

Attorney Docket No.: 13DV-13906 (07783-0081)

Application No.: 10/029,365

Filed: December 20, 2001

Patent No.: 6,755,924

Issued: June 29, 2004

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